M10000002862

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
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EXAMINER



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DEFARCHENT OF CLATE DIVISION OF COMPONATIONS TALL AHASSEE, FLORIOA

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DIVISION OF CORPORATIONS

11 MAY 25 AM 9: 01

CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 222-1173 FILING COVER SHEET ACCT. #FCA-14 **CONTACT: RICKY SOTO** DATE: 05/25/2011 **REF. #:** 000928.148678 CORP. NAME: DLC PROPERTY MANAGER, LLC () ARTICLES OF DISSOLUTION () ARTICLES OF INCORPORATION () ARTICLES OF AMENDMENT () TRADEMARK/SERVICE MARK () FICTITIOUS NAME () ANNUAL REPORT () LIMITED PARTNERSHIP () LIMITED LIABILITY () FOREIGN QUALIFICATION (XX) WITHDRAWAL () MERGER () REINSTATEMENT () CERTIFICATE OF CANCELLATION () OTHER: STATE FEES PREPAID WITH CHECK# 539938 FOR \$ 25.00 **AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:** COST LIMIT: \$_____ PLEASE RETURN: () CERTIFIED COPY () CERTIFICATE OF GOOD STANDING (XX) PLAIN STAMPED COPY

Examiner's Initials

() CERTIFICATE OF STATUS

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

| (Name of limited liability company) |
|---|
| (Name of finited habitity company) |
| Delaware |
| (Jurisdiction of its organization) |
| M10000002862 |
| (Florida Document Number) |
| This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state. |
| This limited liability company revokes the authority of its registered agent to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business in Florida. |
| 580 White Plains Road |
| (Mailing address) |
| Tarrytown, NY 10591 |
| (City/State/Zip) |
| The limited liability company agrees to notify the Department of State in the future of any change in its mailing address. |
| an. |
| (Signature of member or authorized representative of a member) |
| Adam Ifshin |
| (Typed or printed name of signee) |

Filing Fee: \$25.00